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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar	e the name that is on government-issued ure identification (for nple, your driver's	Nicki First name	First name
	licer	nse or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Bond Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-4574	

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Debtor 1 Nicki L Bond

Document Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
		EINs	EINs			
5.	Where you live	7217 S. Rockwell Ave	If Debtor 2 lives at a different address:			
		Chicago, IL 60629 Number, Street, City, State & ZIP Code Cook	Number, Street, City, State & ZIP Code			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Nicki L Bond

art	2: Tell the Court About	Your Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7 ☐ Chapter 11							
		☐ Ch	napter 12						
		■ Ch	napter 13						
3.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
					Illments. If you choose (Official Form 103A).	e this option, sig	s option, sign and attach the Application for Individuals to Pay		
			I request that but is not requapplies to you	t my fee be waiv uired to, waive your family size and	wed (You may request our fee, and may do so I you are unable to pay	only if your inc the fee in insta	come is less than 150% of allments). If you choose to	oter 7. By law, a judge may, of the official poverty line that this option, you must fill out	
			the Applicatio	on to Have the Ch	napter 7 Filing Fee Wa	nived (Official Fo	orm 103B) and file it with	your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes							
			District	ilnbke	When	8/30/16	Case number	16-27766	
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.						
			Debtor				Relationship to y	ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	rou	
			District		When		Case number, if	known	
11.	Do you rent your residence?	□ No.	. Go to li	ne 12.					
		■ Yes	s. Has yo	ur landlord obtair	ned an eviction judgme	ent against you	and do you want to stay	in your residence?	
				No. Go to line 12	2.				
				Yes. Fill out <i>Initi</i> bankruptcy petit		n Eviction Judgr	ment Against You (Form	101A) and file it with this	

Debtor 1 Nicki L Bond Document Page 4 of 65 Case number (if known)

Part	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, State	e & ZIP Code			
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set applications. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, state operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the property of the set of				small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am r	not filing under Chapte	er 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	, Hazardo	ous Property or Any	Property That Needs Immediate Attention			
	Do you own or have any	■ No.	- razara	rue i reporty or runy	Troporty That Hoode Illinounder Allerine.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Chart City Chate 9 7 or de			
					Number, Street, City, State & Zip Code			

Debtor 1 Nicki L Bond Page 5 of 65 Case number (if known)

Part 5: Explain Yo

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

ebto	Case 17-	31459	Doc 1	Filed 10/20/17 Document	Entered 10/20/17 13: Page 6 of 65			
		tions for F	Concreting Du			CI (II NIOWII)		
	Answer These Ques What kind of debts do you have?	16a.	Are your d	ebts primarily consume rimarily for a personal, fa	er debts? Consumer debts are defimily, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go t	o line 16b.				
			Yes. Go					
		16b.			s debts? Business debts are debts or through the operation of the bus			
			☐ No. Go t	o line 16c.				
			☐ Yes. Go	to line 17.				
		16c.	State the ty	pe of debts you owe that	are not consumer debts or busine	ess debts		
	Are you filing under Chapter 7?	■ No.	I am not fili	ng under Chapter 7. Go t	o line 18.			
á	Do you estimate that after any exempt property is excluded and	☐ Yes.			estimate that after any exempt pro	perty is excluded and administrative expenses s?		
	dministrative expenses		□ No	□No				
I	are paid that funds will be available for distribution to unsecured creditors?	d	☐ Yes					
	How many Creditors do you estimate that you	1 -49			1 ,000-5,000	2 5,001-50,000		
	owe?	☐ 50-99 ☐ 100-7 ☐ 200-9	199		□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000		
	How much do you	= \$0 - \$	\$50,000	I	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		001 - \$100,00	•	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			0,001 - \$500,0 0,001 - \$1 milli	00	□ \$100,000,001 - \$100 million	☐ More than \$50 billion		
	How much do you estimate your liabilities	□ \$0 - \$			□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion		
	to be?		,001 - \$100,00 ,001 - \$500,0		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
),001 - \$500,0),001 - \$1 milli		□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
art 7	7: Sign Below							
or y	ou	I have e	xamined this	petition, and I declare un	der penalty of perjury that the infor	rmation provided is true and correct.		
						e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.		
					or agree to pay someone who is no required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this		
		I reques	t relief in acco	ordance with the chapter	of title 11, United States Code, spe	ecified in this petition.		
		bankrup and 357	tcy case can			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Nicki L			Signature of Debte	or 2		

Executed on

MM / DD / YYYY

Executed on October 20, 2017 MM / DD / YYYY

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Debtor 1 Nicki L Bond Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason Blust, Law Office of Jason Blust	Date	October 20, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Jason Blust, Law Office of Jason Blust		
Printed name		
Law Office of Jason Blust, LLC		
Firm name		
211 W Wacker Drive		
STE 300		
Chicago, IL 60606		
Number, Street, City, State & ZIP Code		
Contact phone (312) 273-5001	Email address	
#6276382		
Bar number & State		

		Docume	ent Page 8 of 65	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nicki L Bond			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

1: Summarize Your Assets		
		assets of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,720.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	19,720.00
2: Summarize Your Liabilities		
		iabilities nt you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,381.98
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	12,304.04
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	131,350.70
Your total liabilities	\$	158,036.72
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,515.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,955.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	:hedules.
■ Yes What kind of debt do you have?		
	1a. Copy line 55, Total real estate, from Schedule A/B	1a. Copy line 55, Total real estate, from Schedule A/B

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Nicki L Bond

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,608.35 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	11,175.09
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	1,128.95
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	127,902.02
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	140,206.06

			Document	Page 10 of 65		
Fill in this	information to identi	fy your case a	nd this filing:			
Debtor 1	Nicki L Bon	d				
	First Name		Middle Name	Last Name		
Debtor 2 (Spouse, if filing	ng) First Name		Middle Name	Last Name		
United Sta	tes Bankruptcy Court f	or the: NORT	HERN DISTRICT OF ILLI	NOIS		
Case num	ber					☐ Check if this is an
				_		amended filing
Officia	I Form 106A/	В				
Sche	dule A/B: F	Property	/			12/15
think it fits b information. Answer ever	pest. Be as complete and If more space is needed by question.	d accurate as po I, attach a separ	ossible. If two married peopl	an asset fits in more than on e are filing together, both ar e top of any additional page	e equally responsible for	supplying correct
		equitable interes	st in any residence, building	, iand, or similar property?		
_	to Part 2.					
☐ Yes. \	Where is the property?					
Part 2: De	scribe Your Vehicles					
someone e		a vehicle, also	report it on Schedule G: E	whether they are register Executory Contracts and Ur		vehicles you own that
3.1 Mak	_e . Nissan		Who has an interest in th	no proporty? Cheek and	Do not deduct secured	I claims or exemptions. Put
S.I Mak	Cantus		Debtor 1 only	ie property? Check one		ured claims on Schedule D: Claims Secured by Property.
Yea			Debtor 2 only		Current value of the	Current value of the
Арр	roximate mileage:	78000	Debtor 1 and Debtor 2	,	entire property?	portion you own?
Othe	er information:		☐ At least one of the debt	tors and another		
			Check if this is comm	unity property	\$11,500.00	\$11,500.00
			(see instructions)			
				icles, other vehicles, and nowmobiles, motorcycle ac		
				rom Part 2, including any		\$11,500.00
Part 3: De	scribe Your Personal an	d Household Ite	ems			
Do you ov	vn or have any legal c	or equitable int	terest in any of the follow	ving items?		Current value of the portion you own? Do not deduct secured
6. Househ	old goods and furnis	hings				claims or exemptions.
	les: Major appliances, f		, china, kitchenware			

□ No

Official Form 106A/B Schedule A/B: Property

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Case number (if known) Document Debtor 1 Nicki L Bond Yes. Describe..... \$1,150.00 Miscellaneous used household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$400.00 tv, cell phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections: other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal Used Clothing \$650.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 Miscellaneous costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,300.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Debtor 1	Nicki L Bond	Document	rage 12 01	Case number (if known)	
					claims or exemptions.
□ No	nples: Money you have in your v	vallet, in your home, in a safe de		and when you file your petition	1
. 50				Cash	\$20.00
Exan		er financial accounts; certificates ultiple accounts with the same ir		in credit unions, brokerage ho	uses, and other similar
□ No ■ Yes	S	Institution	ı name:		
	17.1.	Checkin	g account with Ha	arris Bank	\$900.00
10 Pand	le mutual funde er nublielu tr	adad staaks			
	ls, mutual funds, or publicly tr inples: Bond funds, investment a	ccounts with brokerage firms, mo	oney market accour	nts	
■ No □ Yes	sInst	itution or issuer name:			
	publicly traded stock and inte venture	rests in incorporated and unin	corporated busine	esses, including an interest	in an LLC, partnership, and
■ No		ut the cone			
⊔ Yes	s. Give specific information abo Name o			% of ownership:	
Nego Non- ■ No	otiable instruments include perso		romissory notes, and	d money orders.	
21. Retire	ement or pension accounts				
<i>Exan</i> □ No	nples: Interests in IRA, ERISA, I	Keogh, 401(k), 403(b), thrift savir	ngs accounts, or oth	ner pension or profit-sharing pl	ans
■ Yes	s. List each account separately. Type of ac	count: Institution	ı name:		
		401K			\$5,000.00
Your		s u have made so that you may co s, prepaid rent, public utilities (el			es, or others
☐ Yes	S	Institution	name or individual	:	
23. Annu ■ No	ities (A contract for a periodic p	ayment of money to you, either f	or life or for a numb	per of years)	
☐ Yes	s Issuer name ar	d description.			
	sts in an education IRA, in an S.C. §§ 530(b)(1), 529A(b), and	account in a qualified ABLE p 529(b)(1).	rogram, or under a	a qualified state tuition prog	ram.
	Institution name	e and description. Separately file	the records of any	interests.11 U.S.C. § 521(c):	
	s, equitable or future interests	s in property (other than anyth	ing listed in line 1)), and rights or powers exer	cisable for your benefit
■ No □ Yes	s. Give specific information abo	ut them			

		Case 17-31459	Doc 1			Desc Main		
De	ebtor 1	Nicki L Bond		Document	Page 13 of 65 Case number (if known)			
	26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No □ Yes. Give specific information about them							
	Examp ■ No	es, franchises, and other les: Building permits, exclu	usive licenses	ngibles , cooperative association	n holdings, liquor licenses, professional license	es		
Me	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.		
	■ No	unds owed to you Give specific information a	bout them, inc	cluding whether you alre	ady filed the returns and the tax years			
	 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No □ Yes. Give specific information 							
	 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information 							
		ts in insurance policies les: Health, disability, or lif	fe insurance; h	nealth savings account (HSA); credit, homeowner's, or renter's insurar	nce		
		Name the insurance comp Com	any of each p npany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:		
		•	ployer - Terr ender value	n Life Insurance - no	cash	\$0.00		
	If you a someon	erest in property that is on the beneficiary of a living the has died. Give specific information	ng trust, exped		ed surance policy, or are currently entitled to rece	eive property because		
	Examp ■ No	against third parties, whiles: Accidents, employment	nt disputes, in		it or made a demand for payment s to sue			
	■ No	ontingent and unliquidate on the continue of t		every nature, includin	g counterclaims of the debtor and rights to	set off claims		
	■ No	ancial assets you did no Give specific information	-					

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Deb	tor 1 Nicki L Bond		Case number (if known)	
36.	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$5,920.00
_				
Part	5: Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	te in Part 1.	
37. C	o you own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part		Own or Have an Interes	st In.	
	If you own or have an interest in farmland, list it in Part 1.			
46. I	Do you own or have any legal or equitable interest in any farm-	or commercial fishir	g-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information	?		
	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
	,			Ψ0.00
Part	8: List the Totals of Each Part of this Form			
55	Part 1: Total real estate, line 2			\$0.00
	Part 2: Total vehicles, line 5	\$11,500.00	_	φ0.00
	Part 3: Total personal and household items, line 15	\$2,300.00		
	Part 4: Total financial assets, line 36	\$5,920.00		
	Part 5: Total business-related property, line 45	\$0.00		
	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$19,720.00	Copy personal property total	\$19,720.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$19,720.00

Official Form 106A/B Schedule A/B: Property page 5

		12000000	111 11111 11111 111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nicki L Bond			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2014 Nissan Sentra 78000 miles Line from Schedule A/B: 3.1	\$11,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellio IIolii osiloddio 702. o. i			100% of fair market value, up to any applicable statutory limit	
Miscellaneous used household goods	\$1,150.00		\$1,150.00	735 ILCS 5/12-1001(b)
Ellie Holli Galledale PAB. G. 1			100% of fair market value, up to any applicable statutory limit	
tv, cell phone Line from Schedule A/B: 7.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Ellio IIolii osiiodalo 772. 711			100% of fair market value, up to any applicable statutory limit	
Personal Used Clothing Line from Schedule A/B: 11.1	\$650.00		\$650.00	735 ILCS 5/12-1001(a)
zine nem esinedate 702. TTT			100% of fair market value, up to any applicable statutory limit	
Miscellaneous costume jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Holli Gollevale PVD. 12.1			100% of fair market value, up to any applicable statutory limit	

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Nicki L Bond Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking account with Harris Bank 735 ILCS 5/12-1001(b) \$900.00 \$900.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401K 735 ILCS 5/12-1006 100% \$5,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Case :	17-31459	Doc 1 Filed 10/20/17	Entered Page 17	d 10/20/17 13:0 of 65)7:20 Desc N	1ain
Fill in this information	n to identify you					
	icki L Bond	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) Fire	st Name	Middle Name	Last Name			
United States Bankrup	tcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS			
Case number					_	if this is an ded filing
Official Form 10 Schedule D:		Who Have Claims	Secured	l by Property	y	12/15
		If two married people are filing togeth out, number the entries, and attach it				
. Do any creditors have	claims secured by	your property?				
☐ No. Check this	box and submit th	nis form to the court with your other	schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all of	the information	below.				
Part 1: List All Sec	ured Claims					
2. List all secured claim	s. If a creditor has r	more than one secured claim, list the cre	editor separately	Column A	Column B	Column C
		a particular claim, list the other creditor cal order according to the creditor's name		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 OverInd Bond		Describe the property that secures	the claim:	\$14,381.98	\$11,500.00	\$2,881.98
Creditor's Name		2014 Nissan Sentra 78000 mi	iles			
4701 W. Fullert Chicago, IL 606		As of the date you file, the claim is: Check all that apply.				
Number, Street, City, S	State & Zip Code	☐ Unliquidated				
Who owes the debt?	heck one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as car loan)	mortgage or sec	ured		
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit						
Check if this claim re community debt	elates to a	Other (including a right to offset)	PMSI			
Date debt was incurred	Opened 5/12/16 Last Active 7/30/16	Last 4 digits of account num	_{ber} 6330			
Date debt was incurred	1/30/10	- Last 7 digits of account fluin				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$14,381.98

Write that number here:

\$14,381.98

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	ormation to identify your	case:	24.711111.111	1 777. 10 (7)	V. V		
Debtor 1	Nicki L Bond						
D. I	First Name	Middle Na	me	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Na	me	Last Name			
United States	Bankruptcy Court for the:	NORTHERN	DISTRICT OF ILLI	NOIS			
Case number (if known)						_	f this is an ed filing
Official Fo	rm 106E/F						
	E/F: Creditors W	ho Have	Unsecured (Claims			12/15
any executory of Schedule G: Exe Schedule D: Cre eft. Attach the C name and case i	and accurate as possible. Us ontracts or unexpired leases ecutory Contracts and Unexp ditors Who Have Claims Sec continuation Page to this pagnumber (if known).	that could resul ired Leases (Off ured by Property ge. If you have no	It in a claim. Also lis icial Form 106G). Do y. If more space is ne o information to repo	t executory contract not include any cre eeded, copy the Par	ts on Schedule A/B: Feditors with partially s t you need, fill it out, I	roperty (Official Form ecured claims that a number the entries ir	n 106A/B) and on re listed in the boxes on the
	All of Your PRIORITY Un						
1. Do any cred	ditors have priority unsecure	d claims agains	t you?				
	0 Paπ 2.						
identify what possible, list	our priority unsecured claims t type of claim it is. If a claim ha t the claims in alphabetical orde tre than one creditor holds a pa	as both priority an er according to the	d nonpriority amounts e creditor's name. If yo	, list that claim here a ou have more than tw	and show both priority a	nd nonpriority amount	s. As much as
	anation of each type of claim,				Total alaim	Priority	Nonnriority
					Total claim	Priority amount	Nonpriority amount
	Kendrick	Las	st 4 digits of account	number	\$6,406.79	\$6,406.79	\$0.00
1415	Creditor's Name Glen Oaks Drive SW tta, GA 30008	Wh	nen was the debt incu	ırred?			
	r Street City State Zlp Code	As	of the date you file, t	the claim is: Check a	all that apply		
Who incu	rred the debt? Check one.		Contingent				
Debtor	1 only		Unliquidated				
☐ Debtor	2 only		Disputed				
☐ Debtor	1 and Debtor 2 only	Туј	pe of PRIORITY unse	cured claim:			
☐ At least	t one of the debtors and anothe	er \blacksquare	Domestic support obli	gations			
☐ Check	if this claim is for a commu	nity debt 🔲	Taxes and certain oth	er debts you owe the	government		
Is the clair	m subject to offset?		Claims for death or pe	ersonal injury while yo	ou were intoxicated		
■ No			Other. Specify				
☐ Yes			chile	d support arrears	5		
2.2 Charle	es Eaton	Las	st 4 digits of account	number	\$4,768.30	\$4,614.40	\$153.90
Priority 4206	Creditor's Name Lake Laurel Drive		en was the debt incu			<u> </u>	Ψ.σσ.σσ
Smyri Numbe	na, GA 30082 r Street City State Zlp Code	As	of the date you file, t	the claim is: Check a	all that apply		
	rred the debt? Check one.		Contingent				
■ Debtor	1 only		Unliquidated				
☐ Debtor	2 only		Disputed				
	1 and Debtor 2 only		pe of PRIORITY unse	cured claim:			
	t one of the debtors and another	• • • • • • • • • • • • • • • • • • • •	Domestic support obli				
_	if this claim is for a commu	_	Taxes and certain oth	_	government		
	m subject to offset?	_	Claims for death or pe	•	•		
■ No	-	_	Other. Specify	, ,			
☐ Yes		_		rney Fees in cus	stody		

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Debtor 1 Nicki L Bond	Case number (if know)					
2.3 Georgia Family Support Registry	Last 4 digits of account number \$0	0.00 \$0.00	\$0.00			
Priority Creditor's Name POB 2607	When was the debt incurred?					
Carrollton, GA 30112						
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only	☐ Unliquidated					
Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
\square At least one of the debtors and another	Domestic support obligations					
☐ Check if this claim is for a community debt	\square Taxes and certain other debts you owe the government					
Is the claim subject to offset?	\square Claims for death or personal injury while you were intoxicated	t				
No No	Other. Specify					
Yes	notice					
2.4 Illinois Department of Revenue Priority Creditor's Name	Last 4 digits of account number \$115	5.06 \$85.06	\$30.00			
Bankruptcy Section PO Box 64338	When was the debt incurred? 2015					
Chicago, IL 60664 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	☐ Contingent					
■ Debtor 1 only	☐ Unliquidated					
Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
<u>_</u>						
	Thread one of the debtors and another					
☐ Check if this claim is for a community debt Is the claim subject to offset?	 ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated 	4				
No	Other. Specify	,				
□ Yes	taxes					
2.5 Right IRS Priority Creditor's Name	Last 4 digits of account number \$1,013	<u>\$.89</u> <u>\$519.72</u>	\$494.17			
Special Procedures - Insolvency PO Box 7346	When was the debt incurred? 2015					
Philadelphia, PA 19101 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only	☐ Unliquidated					
Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:					
_	Domestic support obligations					
☐ At least one of the debtors and another	<u> </u>					
☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated.	4				
No	☐ Other. Specify	•				
☐Yes	taxes					
Doub Or Line All of Vous MONDDIODITY Has a se	unad Claima					
Part 2: List All of Your NONPRIORITY Unsec						
3. Do any creditors have nonpriority unsecured claim						
☐ No. You have nothing to report in this part. Submi	t this form to the court with your other schedules.					
■ Yes.						
4. List all of your nonpriority unsecured claims in th	e alphabetical order of the creditor who holds each claim. If a c	reditor has more than one nong	oriority			

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Page 20 of 65 Case number (if know) Debtor 1 Nicki L Bond

			Total claim		
4.1	Aargon Agency	Last 4 digits of account number 8699	\$0.00		
	Nonpriority Creditor's Name 8668 Spring Mountain Rd	When was the debt incurred? Opened 04/14			
	Las Vegas, NV 89117 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Collection Attorney Ameren Illinois			
4.2	ameren illinois Nonpriority Creditor's Name	Last 4 digits of account number	\$314.32		
	2105 e state route 104 Pawnee, IL 62558	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	ebt ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts			
	■ No				
	Yes	■ Other. Specifycollection			
4.3	Ascension Services L P Nonpriority Creditor's Name	Last 4 digits of account number 8131	\$0.00		
	1550 N Norwood Ste 305 Hurst, TX 76054	When was the debt incurred? Opened 07/14			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another				
	☐ Check if this claim is for a community				
	debt	obt			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	Factoring Company Account Kahuna Payment Solutions			

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Debio	NICKI L Bond	Case number (if know)	
4.4	Cash Advance	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 807 W Van Buren	When was the debt incurred?	
	Chicago, IL 60607 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify loan	
4.5	City of Chicago	Last 4 digits of account number	\$1,044.00
	Nonpriority Creditor's Name Dept of Finance	When was the debt incurred?	Ψ1,044.00
	PO Box 88292 Chicago, IL 60680	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. SpecifyTickets	
4.6	Consumer Collection	Last 4 digits of account number 7081	\$0.00
	Nonpriority Creditor's Name Po Box 1839	When was the debt incurred? Opened 04/14	
	Maryland Heights, MO 63043 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Collection Attorney St Mary S Decatur Hospital	

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Debtor	1 Nicki L Bond		Case number (if know)				
4.7	Credit Collection Part Nonpriority Creditor's Name	Last 4 digits of account number	9276	\$0.00			
	905 West Spresser	When was the debt incurred?	Opened 01/15				
	Taylorville, IL 62568 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the dam	o. Oneck an mat apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other Specify Collection A	• • • • • • • • • • • • • • • • • • • •				
4.8	Credit Management, LP Nonpriority Creditor's Name	Last 4 digits of account number	7576	\$0.00			
	Attn: Bankruptcy Po Box 118288	When was the debt incurred?	Opened 04/16				
	Carrolton, TX 75011						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	_	Пол					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	d alatina				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a claim:				
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Collection A	Attorney Wow Chicago				
4.9	Fed Loan Servicing	Last 4 digits of account number	0003	\$57,539.00			
	Nonpriority Creditor's Name	_	-				
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 03/16 Last Active 7/31/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes	Other. Specify					
		Educational	<u></u>				

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Debto	1 Nicki L Bond	——————————————————————————————————————	Case number (if know)	
4.1	Fed Loan Servicing Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$0.00
	Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 7/24/13 Last Active 11/25/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ■ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	_	aration agreement or divorce that you did not	
	☐ Yes	Other. Specify		
		Educational		
4.1 1	Flagship Credit Accept Nonpriority Creditor's Name	Last 4 digits of account number	1001	\$0.00
	3 Christy Dr Ste 201 Chadds Ford, PA 19317	When was the debt incurred?	Opened 11/09 Last Active 1/19/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile		
4.1	Harris & Harris Nonpriority Creditor's Name	Last 4 digits of account number	1424	\$0.00
	111 W Jackson Blvd Suite 400 Chicago, IL 60604	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. L.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Med1 02 No	orthwest Community Hospital	

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r1 Nicki L Bond		Case number (if know)	
IC Systems, Inc	Last 4 digits of account number	5958	\$0.00
444 Highway 96 East	When was the debt incurred?	Opened 05/16	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
_			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another		d claim:	
☐ Check if this claim is for a community	_		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection A	Attorney Comcast	
Midwest Credit/coll	Last 4 digits of account number	0132	\$0.00
306 W Eldorado St	When was the debt incurred?	Opened 09/14	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Collection A	Attorney West Mound Apartments	
Midwest Credit/coll	Last 4 digits of account number	0807	\$0.00
Nonpriority Creditor's Name	_		<u> </u>
306 W Eldorado St	When was the debt incurred?	Opened 04/13	
	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	7.5 of the date yearine, the claim	io. Onook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes			
	Nonpriority Creditor's Name 444 Highway 96 East St Paul, MN 55127 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Midwest Credit/coll Nonpriority Creditor's Name 306 W Eldorado St Decatur, IL 62522 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Midwest Credit/coll Nonpriority Creditor's Name 306 W Eldorado St Decatur, IL 62522 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Check if this claim is for a community debt Is the claim subject to offset? No	C. Systems, Inc Nonpriority Creditor's Name 44 Highway 96 East St Paul, MN 55127 Number Street City State Zlp Code When was the debt incurred? As of the date you file, the claim When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Check if this claim is for a community debt Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Collection As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Contingent Unliquidated Disputed Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Contingent Unliquidated Disputed Disputed Disputed Disputed Contingent Unliquidated Disputed Disputed Contingent Contingen	C Systems, Inc Nonpriority Creditor's Name 44.4 Highway 96 East St Paul, Mh 55127 Number Street City State 2 µ Code When was the debt incurred? Opened 05/16 St Paul, Mh 55127 Number Street City State 2 µ Code Contingent Obetor 1 and Debtor 2 only Obetor 1 and Debtor 3 only Obetor 2 only Obetor 1 and Debtor 3 only Obetor 1 and Debtor 3 only Obetor 1 and Debtor 3 only Obetor 4 separation agreement or divorce that you did not report as priority Creditor Shame 306 W Eldorado St Decatur, IL 62522 Number Street City State 2 µ Code When was the debt incurred? Opened 09/14 As of the date you file, the claim is Check all that apply Obetor 1 and Debtor 2 only Obetor 1 and Debtor 3 only Obetor 1 and Debtor 4 only Obetor 1 and Debtor 3 only Obetor 1 and Debtor 4 only Obetor 1 and Debtor 5 only Obetor 1 and Debtor 5 only Obetor 1 only Obetor 1 and Debtor 2 only Obetor 1 only Obetor 1 and Debtor 2 only Obetor 1 only Obetor 1 and Debtor 2 only Obetor 1 only Obetor 1 and Debtor 2 only Obetor 1 only Obetor 1 and Debtor 2 only Obetor 1 only Obetor 1 and Debtor 2 only Obetor 1 only O

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Debtor	1 Nicki L Bond		Case number (if know)				
4.1	Midwest Credit/coll	Last 4 digits of account number	0077	\$0.00			
	Nonpriority Creditor's Name	· ·					
	306 W Eldorado St Decatur, IL 62522	When was the debt incurred?	Opened 07/14 Last Active 7/17/14				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	☐ Yes	■ Other. Specify Collection A	ttorney Decatur Day Care Center	-			
4.1	Midwest Credit/coll	Last 4 digits of account number	0214	\$0.00			
	Nonpriority Creditor's Name 306 W Eldorado St	When was the debt incurred?	Opened 07/13				
	Decatur, IL 62522 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only						
	☐ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Collection A	attorney Decatur Memorial Hospital				
4.1			0045	40.00			
8	Midwest Credit/coll	Last 4 digits of account number	0215	\$0.00			
	Nonpriority Creditor's Name 306 W Eldorado St Decatur, IL 62522	When was the debt incurred?	Opened 07/13				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes	Other. Specify Collection A	ttorney Decatur Memorial Hospital				

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Debt	or 1 Nicki L Bond	——————————————————————————————————————	Case number (if know)				
4.1 9	Orchard Mill	Last 4 digits of account number		\$0.00			
<u> </u>	Nonpriority Creditor's Name 1800 Mulkey Rd	When was the debt incurred?		·			
	Austell, GA 30106 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Offect all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	,				
	■ No	☐ Debts to pension or profit-shari	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify collection					
4.2	OverInd Bond	Last 4 digits of account number	6330	\$0.00			
0	Nonpriority Creditor's Name			Ψ0.00			
	4701 W. Fullerton Ave.		Opened 3/11/16 Last Active				
	Chicago, IL 60639	When was the debt incurred?	4/30/16				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharin					
	Yes	Other. Specify Automobile					
4.2 1	Peoples Gas	Last 4 digits of account number	8917	\$600.00			
	Nonpriority Creditor's Name		On an all 0/40/45 Last Astina				
	200 E Randolph St 20th Floor	When was the debt incurred?	Opened 6/10/15 Last Active 6/13/16				
	Chicago, IL 60601		0/10/10				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	□ Obligations arising out of a separate of the proof of the p	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts				
	□ Yes						
	□ 169	Other. Specify Agriculture					

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Debtoi	1 Nicki L Bond		Case number (if know)	
4.2	Rentdebt Automated Col	Last 4 digits of account number	8038	\$1,490.36
	Nonpriority Creditor's Name 2285 Murfreesboro Rd Ste Nashville, TN 37217	When was the debt incurred?	Opened 07/11	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. SpecifyCollection	Attorney Lincoln Hills Office	
4.2	Scana Energy Nonpriority Creditor's Name	Last 4 digits of account number	4992	\$0.00
	•		Opened 05/09 Last Active	
	220 Operation Way	When was the debt incurred?	1/15/10	
	Cayce, SC 29033 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	<u> </u>	☐ Student loans		
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the state of t	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Agriculture		
4.2	Stanislaus Credit Control Service, Inc.	Last 4 digits of account number	60N1	\$0.00
	Nonpriority Creditor's Name			<u> </u>
	Po Box 480	When was the debt incurred?		
	Modesto, CA 95353 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	no or the date you me, the claim	onesk an that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Med1 02 Ce		
		Culor. Opoonly	•	

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Debtor	1 Nicki L Bond		Case number (if know)				
4.2 5	Us Dept of Ed/Great Lakes Educational Lo	Last 4 digits of account number	8581	\$11,553.16			
	Nonpriority Creditor's Name 2401 International Madison, WI 53704	When was the debt incurred?	Opened 06/13 Last Active 3/18/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loansObligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
		Education	al				
42	Us Dept of Ed/Great Lakes						
4.2 6	Educational Lo	Last 4 digits of account number	9581	\$0.00			
	Nonpriority Creditor's Name		Opened 08/12 Last Active				
	2401 International Madison, WI 53704	When was the debt incurred?	3/18/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	Contingent					
	☐ Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loansObligations arising out of a sepa report as priority claims					
	No	Debts to pension or profit-sharin	o plans, and other similar debts				
	Yes	Other. Specify	g plane, and care carman desite				
	L les	Educational	_				
4.2 7	US Dept of Education	Last 4 digits of account number	8974	\$58,809.86			
	Nonpriority Creditor's Name c/o Fedloan Servicing POB 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 7/24/13 Last Active 8/14/13				
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent☐ Unliquidated					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	Disputed				
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	 Student loans Obligations arising out of a sepa 					
	Is the claim subject to offset?	report as priority claims	manon agreement of divolce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
		Educational					

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	ept of Education	Last 4 digits of account number	9874		\$0.00			
•	rity Creditor's Name Bankruptcy		Opono	d 6/20/13 Last Active				
	x 16448	When was the debt incurred?	7/12/13					
	Paul, MN 55116							
	Street City State Zlp Code	As of the date you file, the claim	is: Check a	II that apply				
Who inc	curred the debt? Check one.	_						
Debt	or 1 only	Contingent						
□ Debt	or 2 only	☐ Unliquidated						
☐ Debt	or 1 and Debtor 2 only	☐ Disputed						
☐ At le	ast one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
☐ Che	ck if this claim is for a community	Student loans						
debt		Obligations arising out of a sepa	aration agre	ement or divorce that you did not				
	laim subject to offset?	report as priority claims						
No		☐ Debts to pension or profit-sharir	ng plans, ar	d other similar debts				
☐ Yes		Other. Specify			-			
		Educational						
	ar Cobb Hospital	Last 4 digits of account number			\$0.00			
3950 A	rity Creditor's Name Austell rd SW	When was the debt incurred?			_			
	I, GA 30106							
	Street City State Zlp Code	As of the date you file, the claim	is: Check a	Il that apply				
_		_						
	or 1 only	<u> </u>	☐ Contingent ☐ Unliquidated					
☐ Debt	or 2 only	☐ Unliquidated						
☐ Debt	or 1 and Debtor 2 only	☐ Disputed						
☐ At le	ast one of the debtors and another	<u></u> '	Type of NONPRIORITY unsecured claim:					
	ck if this claim is for a community	☐ Student loans						
debt	laine audicat to affact0	Obligations arising out of a sepa	aration agre	ement or divorce that you did not				
	laim subject to offset?	report as priority claims Debts to pension or profit-sharir		d other cimilar debte				
■ No			ig piaris, ar	d other similar debts				
☐ Yes		Other. Specify medical			=			
	Others to Be Notified About a D	•						
this page (only if you have others to be notified	l about your bankruptcy, for a debt that y	ou already	Isted in Parts 1 or 2. For examp	ile, if a collection agenc			
ying to col	lect from you for a debt you owe to	someone else, list the original creditor in	Parts 1 or	2, then list the conection agency	y nere. Similarly, if you			
e more tha	n one creditor for an debt you owe to n one creditor for any of the debts ti y debts in Parts 1 or 2, do not fill out	nat you listed in Parts 1 or 2, list the addi	Parts 1 or	itors here. If you do not have add	ditional persons to be			
e more tha fied for an	n one creditor for any of the debts the debts they debts in Parts 1 or 2, do not fill out	nat you listed in Parts 1 or 2, list the addi	n Parts 1 or	itors here. If you do not have add	y nere. Similarly, if you ditional persons to be			
e more tha fied for an	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of	nat you listed in Parts 1 or 2, list the addi or submit this page. Jnsecured Claim	tional cred	itors here. If you do not have add	ditional persons to be			
e more that fied for any Add	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of unts of certain types of unsecured c	nat you listed in Parts 1 or 2, list the addi	tional cred	itors here. If you do not have add	ditional persons to be			
e more tha fied for any	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of unts of certain types of unsecured c	nat you listed in Parts 1 or 2, list the addi or submit this page. Jnsecured Claim	tional cred	itors here. If you do not have add	ditional persons to be			
e more that lied for any Add	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of I unts of certain types of unsecured cured claim.	nat you listed in Parts 1 or 2, list the addi or submit this page. Jnsecured Claim laims. This information is for statistical r	eporting p	itors here. If you do not have add urposes only. 28 U.S.C. §159. Add	ditional persons to be			
e more that fied for any Add	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of unts of certain types of unsecured c	nat you listed in Parts 1 or 2, list the addi or submit this page. Jnsecured Claim laims. This information is for statistical r	tional cred	itors here. If you do not have add	ditional persons to be			
Add If the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of I unts of certain types of unsecured cured claim. 6a. Domestic support obligation	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical r	eporting p	urposes only. 28 U.S.C. §159. Add Total Claim \$11,175.09	ditional persons to be d the amounts for each			
Add If the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delivered course.	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical research.	eporting p 6a. 6b.	urposes only. 28 U.S.C. §159. Add Total Claim \$11,175.09	ditional persons to be d the amounts for each			
Add I the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delection 6c. Claims for death or persons	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical runs ots you owe the government all injury while you were intoxicated	eporting p 6a. 6b. 6c.	titors here. If you do not have add urposes only. 28 U.S.C. §159. Add Total Claim \$ 11,175.09 \$ 1,128.95 \$ 0.00	ditional persons to be d the amounts for each			
Add I the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delection 6c. Claims for death or persons	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical research.	eporting p 6a. 6b.	urposes only. 28 U.S.C. §159. Add Total Claim \$11,175.09	ditional persons to be d the amounts for each			
Add I the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delect. Claims for death or persons 6d. Other. Add all other priority undebts in Parts 1 or 1 o	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical right in the stati	eporting p 6a. 6b. 6c. 6d.	Total Claim	ditional persons to be d the amounts for each -			
Add I the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delection 6c. Claims for death or persons	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical right in the stati	eporting p 6a. 6b. 6c.	titors here. If you do not have add urposes only. 28 U.S.C. §159. Add Total Claim \$ 11,175.09 \$ 1,128.95 \$ 0.00	ditional persons to be d the amounts for each -			
Add If the amou of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delect. Claims for death or persons 6d. Other. Add all other priority undebts in Parts 1 or 1 o	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical right in the stati	eporting p 6a. 6b. 6c. 6d.	Total Claim	ditional persons to be d the amounts for each			
a more that fied for any 4: Add all the amount of unsecutors Total claims	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of the unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delect. Claims for death or persons 6d. Other. Add all other priority undebts in Parts 1 or 1 o	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical right in the stati	eporting p 6a. 6b. 6c. 6d.	Total Claim	ditional persons to be d the amounts for each			
more that ited for any Add I the amou of unsecutor Total claims Part 1	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of I unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other delected for Claims for death or personated. 6d. Other. Add all other priority under the control of	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical right in the stati	eporting p 6a. 6b. 6c. 6d.	Total Claim	ditional persons to be d the amounts for each			
4: Add al the amore of unsecu	n one creditor for any of the debts to y debts in Parts 1 or 2, do not fill out the Amounts for Each Type of I unts of certain types of unsecured cured claim. 6a. Domestic support obligation 6b. Taxes and certain other del 6c. Claims for death or personated 6d. Other. Add all other priority untserved 6e. Total Priority. Add lines 6a to 6f. Student loans	nat you listed in Parts 1 or 2, list the addition submit this page. Jnsecured Claim laims. This information is for statistical right in the stati	eporting p 6a. 6b. 6c. 6d.	Total Claim	ditional persons to be d the amounts for each			

Debtor 1 Nicki L Bond

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Debtor 1 Nicki L Bond

6h.	Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount here.	6h.	\$ 0.00
6i.		6i.	 3,448.68
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 131,350.70

Fill in this information to identify your case:
Debtor 1 Nicki L Bond
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Byron Jackson 7217 S. Rockwell Ave Chicago, IL 60629	month to month residential lease

		Docume	ent Page 32 o	ot 65	_
Fill in thi	s information to identify you	r case:			
Debtor 1	Nicki L Bond First Name	Middle Name	Last Name		
Dobtor 2	i iist ivaille	Wildle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
(-1,	3,				
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case nur (if known)	nber				☐ Check if this is an
(ii idiowii)					Check if this is an amended filing
					amended ming
Officia	al Form 106H				
Sche	dule H: Your Cod	debtors			12/15
ill it out,		e boxes on the left. Attach	the Additional Page		needed, copy the Additional Page, op of any Additional Pages, write
1. Do	you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No	2				
	55				
	ithin the last 8 years, have yo ona, California, Idaho, Louisiana				rty states and territories include .)
■ No	o. Go to line 3.				
	es. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
\	se. Dia year opease, reimer ope	oudo, or logar oquivalent live	with you at the time.		
in lin Form	ne 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The ci	reditor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedu	les that apply:
3.1	Name			DSchedule D, li	
	Name			☐ Schedule E/F,	· · · · · · · · · · · · · · · · · · ·
				☐ Schedule G, li	ne
	Number Street			<u>—</u>	
	City	State	ZIP Code		
				_	
3.2				D Schedule D, li	
	Name			☐ Schedule E/F,	
				☐ Schedule G, li	ne
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to ic	dentify your ca	ase:								
Del	btor 1 N	licki L Bond				_					
	btor 2										
Uni	ited States Bankruptcy	Court for the	NORTHERN DISTRIC	T OF ILLINOIS		_					
_	se number							nended plemer	nt showing	g postpetition ollowing date:	chapter
0	fficial Form 1	<u>061</u>					MM /	DD/ Y\	/YY		
S	chedule I: Y	our Inc	ome								12/15
sup spo atta	plying correct inform use. If you are separ ch a separate sheet t	nation. If you ated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse de infor	is livi: matio	ng with you n about yoι	, inclu ır spot	de inform use. If mo	nation about ore space is	your needed,
1.	Fill in your employ information.	ment		Debtor 1			Del	btor 2	or non-fil	ling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Employed				
	attach a separate pa	to page with	Employment status	☐ Not employed				☐ Not employed			
	employers.		Occupation	Training Facilitat	or						
	Include part-time, se self-employed work.		Employer's name	University of Illin	ois						
	Occupation may incl or homemaker, if it a		Employer's address	1010 W Nevada M/C 082 Chicago, IL 0000)1						
			How long employed the	nere? 4 month	าร						
Pai	rt 2: Give Detail	ls About Mon	thly Income								
	mate monthly incomuse unless you are sep		ate you file this form. If y	ou have nothing to r	eport for	any li	ne, write \$0	in the s	space. Inc	clude your nor	n-filing
	ou or your non-filing sp e space, attach a sepa		re than one employer, co	mbine the informatio	n for all e	emplo	yers for that	persor	on the lir	nes below. If y	ou need
							For Debtor	1		otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthly		2.	\$_	4,167	7.00	\$	N/A	
3.	Estimate and list m	onthly overti	me pay.		3.	+\$_	C	0.00	+\$	N/A	
4.	Calculate gross Inc	come. Add lin	e 2 + line 3.		4.	\$_	4,167.0	0_	\$	N/A	

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Deb	tor 1	Nicki L Bond	_	С	ase numbe	er (<i>if known</i>)				
				ì	For Debt	or 1		r Debtor n-filing s		
	Cop	y line 4 here	4.		\$ 4	4,167.00	\$	iii-iiiiig s	N/A	
5.	List	all payroll deductions:								
٥.	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	545.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$	333.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		\$	0.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00	\$		N/A	-
	5e.	Insurance	5e.		\$	201.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	631.00	\$		N/A	_
	5g.	Union dues	5g.		\$	0.00	\$		N/A	-
	5h.	Other deductions. Specify:	5h	+	\$	0.00	+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	5	\$	1,710.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	5	\$2	2,457.00	\$_		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90		\$	0.00	¢		NI/A	
	8b.	monthly net income. Interest and dividends	8a. 8b.		ֆ \$	0.00	\$ \$		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			Ψ	0.00	Ψ_		IN/A	-
		settlement, and property settlement.	8c.		\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.		\$	0.00	\$		N/A	-
	8e.	Social Security	8e.		\$	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$_		N/A	_
	8g.	Pension or retirement income	8g.		\$	0.00	\$_		N/A	_
	8h.	Other monthly income. Specify: Prorated Tax Refund	8h	+	\$	58.00	+ \$_		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		58.00	\$_		N/A	A
10.	Calo	culate monthly income. Add line 7 + line 9.	10. \$	5	2.515	5.00 + \$		N/A	= \$	2,515.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,					,
11.	State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00						0.00			
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						e. 12.	\$Combin	
13	Do	you expect an increase or decrease within the year after you file this form	?						monthl	y income
10.		No. Yes. Explain:	•							

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7111	in this information to identify your case:									
Deb	Nicki L Bond			Che □	ck if this is: An amended filing					
	otor 2ouse, if filing)				· ·	ving postpetition chapter the following date:				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS					MM / DD / YYYY					
	se numbef known)	_								
Of	fficial Form 106J									
Sc	chedule J: Your Expenses					12/15				
Be info	as complete and accurate as possible. If two ma ormation. If more space is needed, attach anothe mber (if known). Answer every question.									
Par 1.	rt 1: Describe Your Household Is this a joint case?									
1.	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate housel □ No □ Yes. Debtor 2 must file Official Form 10		r Separate Housel	<i>hold</i> of Deb	otor 2.					
2.	Do you have dependents? ■ No									
	Do not list Debtor 1 and Yes. Fill out this		Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?				
	Do not state the dependents names.	_				□ No □ Yes				
						□ No □ Yes				
		_				□ No				
		_				☐ Yes				
						□ No				
2	Do your expenses include	-				☐ Yes				
3.	expenses of people other than yourself and your dependents?									
Est exp	t 2: Estimate Your Ongoing Monthly Expense timate your expenses as of your bankruptcy filing penses as of a date after the bankruptcy is filed. I plicable date.	date unless you	are using this fo mental <i>Schedule</i>	orm as a si J, check t	upplement in a Cha he box at the top o	opter 13 case to report f the form and fill in the				
the	clude expenses paid for with non-cash governme e value of such assistance and have included it of fficial Form 106I.)				Your expe	enses				
4.	The rental or home ownership expenses for yo payments and any rent for the ground or lot.	ur residence. Incl	ude first mortgage	4.	\$	900.00				
	If not included in line 4:									
	4a. Real estate taxes			4a.	\$	0.00				
	4b. Property, homeowner's, or renter's insurance			4b.	· ———	0.00				
	4c. Home maintenance, repair, and upkeep exp			4c.	·	0.00				
5.	4d. Homeowner's association or condominium of Additional mortgage payments for your resider		equity loans	4d. 5.		0.00				
J.	raditional mortgage payments for your resider	··· such as HUITIE	oquity IUal 13	J	¥	U.UU				

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Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: If and housekeeping supplies Idicare and children's education costs Ining, laundry, and dry cleaning Idicare products and services Ical and dental expenses Include gas, maintenance, bus or train fare. Include car payments. Include car payments. Include contributions and religious donations Include insurance deducted from your pay or included in lines 4 or 20. If include insurance Wehicle insurance Other insurance. Other insurance. Specify: Include insurance of the insurance of the insurance of the insurance Other insurance of the insurance Other insurance of the insurance of the insurance of the insurance Other insurance of the insurance	6a. \$ 6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17d. \$ 17c. \$ 17d. \$	95.00 0.00 130.00 0.00 350.00 0.00 50.00 100.00 200.00 0.00 0.00 0.00 130.00 0.00 0.00 0.
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: It and housekeeping supplies Idcare and children's education costs Ining, laundry, and dry cleaning Idea on and dental expenses Idea on and care products Ide	6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$	0.00 130.00 0.00 350.00 0.00 50.00 100.00 200.00 0.00 0.00 130.00 0.00 0.00 0.00 0.
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: If and housekeeping supplies Idicare and children's education costs Ining, laundry, and dry cleaning Idicare products and services Idical and dental expenses Idical and housekeeping supplies Idical and housekeeping	6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$	0.00 130.00 0.00 350.00 0.00 50.00 100.00 200.00 0.00 0.00 130.00 0.00 0.00 0.00 0.
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: If and housekeeping supplies Idcare and children's education costs Ining, laundry, and dry cleaning Idcare products and services Idcare and dental expenses Ining, laundry, and dry cleaning Idcare products and services Idcare and dental expenses Idcare products and services Idcare and dental expenses Ining, laundry, and dry cleaning Idcare products and services Idcare products and services Ining, laundry, and dry cleaning Idcare products and services Ining, laundry, and dry cleaning Ining, laundry, and bevoices Ining, laundr	6c. \$	130.00 0.00 350.00 0.00 50.00 100.00 200.00 0.00 0.00 0.00 130.00 0.00 0.00 0.
Other. Specify: If and housekeeping supplies Idcare and children's education costs Ining, laundry, and dry cleaning Idcare products and services Idcare and dental expenses Idcare and dental expenses Idcare and dental expenses Idcare products and services Idcare products and services Idcare products and services Idcare payments. Include car payments. Include car payments. Include contributions and religious donations Idcare. Include insurance deducted from your pay or included in lines 4 or 20. Include insurance Idealth insurance Idealth insurance Idealth insurance. Idealth insurance. Specify: Idealth insurance. Specify: Idealth insurance. Specify: Idealth insurance. Incare payments: Idealth insurance include taxes deducted from your pay or included in lines 4 or 20. Incare payments for Vehicle 1 Idealth insurance include taxes deducted from your pay or included in lines 4 or 20. Incare payments for Vehicle 2 Idealth insurance include insurance, and support that you did not report included from your pay on line 5, Schedule I, Your Income (Official Form 106)	6d. \$	0.00 350.00 0.00 50.00 100.00 200.00 0.00 0.00 0.00 130.00 0.00 0.00 0.
d and housekeeping supplies dicare and children's education costs ning, laundry, and dry cleaning onal care products and services cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: other. Specify: payments of alimony, maintenance, and support that you did not report and other payments for your pay on line 5, Schedule I, Your Income (Official Form 106)	7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$	350.00 0.00 50.00 100.00 200.00 0.00 0.00 0.00 130.00 0.00 0.00 0.00 0.00 0.00
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cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books ritable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. iffy: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: other. Specify: payments of alimony, maintenance, and support that you did not report a litted from your pay on line 5, Schedule I, Your Income (Official Form 106)	11. \$	0.00 200.00 0.00 0.00 0.00 130.00 0.00 0.00 0.
sportation. Include gas, maintenance, bus or train fare. on include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. iffy: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a litted from your pay on line 5, Schedule I, Your Income (Official Form 106)	12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 16. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$	200.00 0.00 0.00 0.00 0.00 130.00 0.00 0.00 0.00 0.00 0.00
or include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. or include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. iffy: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a litted from your pay on line 5, Schedule I, Your Income (Official Form 106)	13. \$	0.00 0.00 0.00 0.00 130.00 0.00 0.00 0.0
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to include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a litted from your pay on line 5, Schedule I, Your Income (Official Form 106)	15a. \$	0.00 0.00 130.00 0.00 0.00 0.00 0.00
ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a litted from your pay on line 5, Schedule I, Your Income (Official Form 106)	15b. \$	0.00 130.00 0.00 0.00 0.00 0.00 0.00
Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a licted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	15b. \$	0.00 130.00 0.00 0.00 0.00 0.00 0.00
Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. iffy: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a little from your pay on line 5, Schedule I, Your Income (Official Form 106)	15b. \$	0.00 130.00 0.00 0.00 0.00 0.00 0.00
Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a lotted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	15c. \$ 15d. \$ 16. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$	130.00 0.00 0.00 0.00 0.00 0.00
Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a lotted from your pay on line 5, Schedule I, Your Income (Official Form 106)	15d. \$ 16. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$ 17d. \$ 17d. \$ 17d. \$	0.00 0.00 0.00 0.00 0.00
s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a licted from your pay on line 5, Schedule I, Your Income (Official Form 106)	16. \$17a. \$17b. \$17c. \$17d. \$	0.00 0.00 0.00 0.00
ifly: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a locted from your pay on line 5, Schedule I, Your Income (Official Form 106)	17a. \$ 17b. \$ 17c. \$ 17d. \$	0.00 0.00 0.00
Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report acted from your pay on line 5, Schedule I, Your Income (Official Form 106)	17a. \$ 17b. \$ 17c. \$ 17d. \$	0.00 0.00 0.00
Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report a licted from your pay on line 5, Schedule I, Your Income (Official Form 106I	17b. \$ 17c. \$ 17d. \$	0.00 0.00
Car payments for Vehicle 2 Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report acted from your pay on line 5, Schedule I, Your Income (Official Form 106)	17b. \$ 17c. \$ 17d. \$	0.00 0.00
Other. Specify: Other. Specify: payments of alimony, maintenance, and support that you did not report acted from your pay on line 5, Schedule I, Your Income (Official Form 106)	17c. \$ 17d. \$	0.00
Other. Specify: payments of alimony, maintenance, and support that you did not report a payment from your pay on line 5, Schedule I, Your Income (Official Form 106)	17d. \$	
payments of alimony, maintenance, and support that you did not report a locted from your pay on line 5, Schedule I, Your Income (Official Form 106I		0.00
icted from your pay on line 5, Schedule I, Your Income (Official Form 106)		
		0.00
r navmente vou make to cuppert others who do not live with you	s —	
r payments you make to support others who do not live with you.	19. Ψ ——	0.00
ify: r real property expenses not included in lines 4 or 5 of this form or on <i>Sc</i>		ma
Mortgages on other property	20a. \$	ne. 0.00
Real estate taxes	20b. \$	0.00
	· —	
Property, homeowner's, or renter's insurance	20c. \$	0.00
	·	0.00
	· —	0.00
r: Specify:	21+\$	0.00
ulate your monthly expenses		
	S	1,955.00
S .		1,935.00
		1.055.00
Add line ZZa and ZZb. The result is your monthly expenses.	*	1,955.00
ulate your monthly net income.		
	23a. \$	2,515.00
		1,955.00
		1,555.00
Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	560.00
	L	
	ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. ou expect an increase or decrease in your expenses within the year after	Homeowner's association or condominium dues 20e. \$ 21. +\$ ulate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. ulate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. ou expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to

■ No.	
ΠYes	Explain here:

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Fill in this infor	mation to identify your	case:			
Debtor 1	Nicki L Bond				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
		n Individual	Dobtorio C	abadulaa	
Declara	tion About a	in individua	Deproi 2 2	chedules	12/15
obtaining mone	is form whenever you fi y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	n connection with a ban	s or amended schedule kruptcy case can resul	es. Making a false state t in fines up to \$250,00	ement, concealing property, or 0, or imprisonment for up to 20
, , , , , , , , , , , , , , , , , , , ,	33,, .	- · · · · · · · · · · · · · · · · · · ·			
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
□ Yes.	Name of person			Attach Rank	ruptcy Petition Preparer's Notice,
					and Signature (Official Form 119)
	alty of perjury, I declare	that I have read the sun	nmary and schedules fi	led with this declaration	on and
that they ar	re true and correct.				
X /s/ Nic	ki L Bond		X		
Nicki L			Signature of	of Debtor 2	
Signatu	re of Debtor 1				
Date	October 20, 2017		Date		
_ = = = = =	00.0001 20, 2017				

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FIII	in this inform	nation to identify you	r case:			
Del	btor 1	Nicki L Bond First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ileu States dai	nkruptcy Court for the:	NORTHERN DISTRICT (DF ILLINOIS		
	se number nown)				_	Check if this is an mended filing
Sta Be a info	as complete a	of Financial and accurate as possiore space is needed,	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup	
		n). Answer every questetails About Your Ma	stion. arital Status and Where You	Lived Before		
1.		current marital statu				
	☐ Married Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territor co, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$22,728.42	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Nicki L Bond

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calen anuary 1 to		31, 2016)	■ Wages, commissions, bonuses, tips	\$28,221.00	☐ Wages, commission bonuses, tips	ns,
				☐ Operating a business		☐ Operating a busines	SS
	r the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$33,129.00	☐ Wages, commission bonuses, tips	ns,
				☐ Operating a business		☐ Operating a busines	SS
	and other winnings. List each s	public bene If you are fil	fit payments; ing a joint cas the gross inco	ner that income is taxable. Exapensions; rental income; interie and you have income that you have from each source separate	est; dividends; money collect ou received together, list it of	ed from lawsuits; royaltienly once under Debtor 1.	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	vments You	Made Before You Filed for I	,		
6.	Are either ☐ No.	Neither Dindividual During the No. Yes	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below e paid that cr not include	es debts primarily consumer lebtor 2 has primarily consumer personal, family, or household the you filed for bankruptcy, die and creditor to whom you paid editor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years	mer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,425* or more in ts for domestic support obligations bankruptcy case.	of \$6,425* or more? none or more payments ations, such as child supp	and the total amount you port and alimony. Also, do
	■ Yes.			r both have primarily consure you filed for bankruptcy, die		of \$600 or more?	
		■ No.	Go to line 7				
		□ Yes	include pay	each creditor to whom you paid ments for domestic support of this bankruptcy case.			
	Creditor'	s Name an	d Address	Dates of payme	nt Total amount	Amount you Was	this navment for

paid

still owe

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Case number (if known) Debtor 1 Nicki L Bond

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 14 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations agent, including one for
	■ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
			paid	Juli Owe	molado orda	mor o ridine
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes, Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seize Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 		d, seized, or levied?				
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	I			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		luding a bank or fii	nancial institutior	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possess			efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	ccy, did you give any gifts	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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Debtor 1	Nicki L Bond		Case number (if known)	

 14. Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con 			did you give any gifts or contributions with a totalion.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred	Include	the any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
	consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr □ No ■ Yes. Fill in the details.		ng a bankruptcy petition? s, or credit counseling agencies for services require	d in your bankruptcy.	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Office of Jason Blust 211 W. Wacker Suite 300 Chicago, IL 60606	Ju	\$330.00 paid pre-petition toward total attorney fee of \$4,000.00, filing fee of \$310.00, and expenses of \$20.00 (\$4,000.00 to be paid in chapter 13 plan)	2017	\$330.00
	Law Office of Jason Blust, LLC 211 W Wacker Drive STE 300 Chicago, IL 60606		\$931.60 Attorney Fees paid in prior case	2016-2017	\$931.60
17.	Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that you	itors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Nicki L Bond

8.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v		Describe any property payments received or paid in exchange		r was
	Person's relationship to you					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a s	elf-settled trust or simila	r device of which you a	are a
	☐ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prop	erty transferred	Date Transfe made	er was
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Sto	rage Units		
	<u> </u>		·			
<u>?</u> 0.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o	r other financial accour	nts; certificates o	of deposit; shares in ban		
	houses, pension funds, cooperatives, assoc	ciations, and other finar	icial institutions	•		
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour	nt or Date account was closed, sold, moved, or transferred	before clos	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any	safe deposit box or other	er depository for securi	ities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you sti have it?	ill
22.	Have you stored property in a storage unit of	or place other than your	home within 1 y	ear before you filed for b	ankruptcy?	
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you sti have it?	ill
Dar	4 Or Identify Dremonty Vey Hold or Control	for Company Flor				
Far	t 9: Identify Property You Hold or Control	for Someone Eise				
23.	Do you hold or control any property that sor for someone.	neone else owns? Inclu	ude any property	you borrowed from, are	storing for, or hold in t	trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property		Value
Par	t 10: Give Details About Environmental Info	ormation				
						
or	the purpose of Part 10, the following definition	ons apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Debtor 1 Nicki L Bond

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in viola No Yes. Fill in the details. Name of site Governmental unit Environment	tion of an environmental law? tal law, if you Date of notice							
■ No □ Yes. Fill in the details.								
Yes. Fill in the details.	tal law, if you Date of notice							
Yes. Fill in the details.	tal law, if you Date of notice							
Name of site Governmental unit Environment	tal law, if you Date of notice							
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) know it ZIP Code)								
25. Have you notified any governmental unit of any release of hazardous material?								
■ No □ Yes. Fill in the details.								
Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental unit Address (Number, Street, City, State and ZIP Code)	tal law, if you Date of notice							
26. Have you been a party in any judicial or administrative proceeding under any environmental law? In	nclude settlements and orders.							
■ No □ Yes. Fill in the details.								
Case Title Court or agency Nature of the ca Name Address (Number, Street, City, State and ZIP Code)	se Status of the case							
Part 11: Give Details About Your Business or Connections to Any Business								
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following	a connections to any business?							
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time of	•							
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
☐ A partner in a partnership								
☐ An officer, director, or managing executive of a corporation								
☐ An owner of at least 5% of the voting or equity securities of a corporation								
No. None of the above applies. Go to Part 12.								
Yes. Check all that apply above and fill in the details below for each business.								
1.7	dentification number ude Social Security number or ITIN.							
(Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper	ness existed							
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about y institutions, creditors, or other parties.	your business? Include all financial							
■ No								
☐ Yes. Fill in the details below.								
Name Address (Number, Street, City, State and ZIP Code)								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 17-31459 Doc 1 Filed 10/20/17 Entered 10/20/17 13:07:20 Page 44 of 65 Case number (if known) Document

Debtor 1 Nicki L Bond

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nicki L Bond Signature of Debtor 2 Nicki L Bond

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No ☐ Yes

Signature of Debtor 1

Date October 20, 2017

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ☑ The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - The Debtor(s) and Attorney have entered into an advance payment retainer for pre-filing and pre-confirmation work including, but not limited to, pre-filing bankruptcy advice, preparation of the petition and Chapter 13 plan, pre-filing bankruptcy planning, filing of the case, and any amendments necessary for confirmation. Pre-filing work is performed periodically as payments are received.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$330.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$330.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: October 20, 2017	
Signed:	
Nicki L Bond	Jason Blust, Law Office of Jason Blust
	Attorney for the Debtor(s)
Dahtar(a)	
Debtor(s)	
Do not sign this agreement if the amou	nts are blank.

Local Bankruptcy Form 23c

Case 17-31459 Doc 1 Filed 10/20/17 Entered 10/20/17 13:07:20 Desc Main Document Page 55 of 65

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re Nicki L Bond Debtor(s) Case No. Chapter 13 DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendere be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my International Compensation of the prior of the prior of the prior of the prior of the paid to me associates of my International Compensation of the prior of the paid to me is: I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my International Compensation of the prior of the prio	
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■ Debtor □ Other (specify):	
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4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my leading to the compensation of the compensation with any other person unless they are members and associates of my leading to the compensation with any other person unless they are members and associates of my leading to the compensation with any other person unless they are members and associates of my leading to the compensation with any other person unless they are members and associates of my leading to the compensation with any other person unless they are members and associates of my leading to the compensation with any other person unless they are members and associates of my leading to the compensation with any other person unless they are members and associates of my leading to the compensation with a compensation wit	
	aw firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law fir copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.	n. A
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; e. [Other provisions as needed] In Chapter 13 cases, the Court-Approved Retention Agreement is hereby incorporated by reference. 	,
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:	
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(this bankruptcy proceeding.	s) in
October 20, 2017 /s/ Jason Blust, Law Office of Jason Blust	
Date Jason Blust, Law Office of Jason Blust	
Signature of Attorney Law Office of Jason Blust, LLC	
211 W Wacker Drive	
STE 300	
Chicago, IL 60606	
(312) 273-5001 Fax: (312) 273-5022 Name of law firm	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED.

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
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THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - The Debtor(s) and Attorney have entered into an advance payment retainer for pre-filing and pre-confirmation work including, but not limited to, pre-filing bankruptcy advice, preparation of the petition and Chapter 13 plan, pre-filing bankruptcy planning, filing of the case, and any amendments necessary for confirmation. Pre-filing work is performed periodically as payments are received.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$330.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4.000.00; and \$330.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Signed:

Nicki L/Bond

Jason Blust, Law Office of Jason Blust

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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United States Bankruptcy Court Northern District of Illinois

In re	Nicki L Bond		Case No.		
		Debtor(s)	Chapter 13		
	VE	CRIFICATION OF CREDITOR M	ATRIX		
		Number of Creditors:		28	
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credit	fors is true and correct to t	he best of my	
Date:	October 20, 2017	/s/ Nicki L Bond Nicki L Bond			

Aargon Agency 8668 Spring Mountain Rd Las Vegas, NV 89117

Aaron Kendrick 1415 Glen Oaks Drive SW Marietta, GA 30008

ameren illinois 2105 e state route 104 Pawnee, IL 62558

Ascension Services L P 1550 N Norwood Ste 305 Hurst, TX 76054

Cash Advance 807 W Van Buren Chicago, IL 60607

Charles Eaton 4206 Lake Laurel Drive Smyrna, GA 30082

City of Chicago Dept of Finance PO Box 88292 Chicago, IL 60680

Consumer Collection Po Box 1839 Maryland Heights, MO 63043

Credit Collection Part 905 West Spresser Taylorville, IL 62568

Credit Management, LP Attn: Bankruptcy Po Box 118288 Carrolton, TX 75011

Fed Loan Servicing Po Box 69184 Harrisburg, PA 17106 Flagship Credit Accept 3 Christy Dr Ste 201 Chadds Ford, PA 19317

Georgia Family Support Registry POB 2607 Carrollton, GA 30112

Harris & Harris 111 W Jackson Blvd Suite 400 Chicago, IL 60604

IC Systems, Inc 444 Highway 96 East St Paul, MN 55127

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664

IRS
Special Procedures - Insolvency
PO Box 7346
Philadelphia, PA 19101

Midwest Credit/coll 306 W Eldorado St Decatur, IL 62522

Orchard Mill 1800 Mulkey Rd Austell, GA 30106

Overlnd Bond 4701 W. Fullerton Ave. Chicago, IL 60639

Peoples Gas 200 E Randolph St 20th Floor Chicago, IL 60601 Rentdebt Automated Col 2285 Murfreesboro Rd Ste Nashville, TN 37217

Scana Energy 220 Operation Way Cayce, SC 29033

Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353

Us Dept of Ed/Great Lakes Educational Lo 2401 International Madison, WI 53704

US Dept of Education c/o Fedloan Servicing POB 69184 Harrisburg, PA 17106

US Dept of Education Attn: Bankruptcy Po Box 16448 Saint Paul, MN 55116

WellStar Cobb Hospital 3950 Austell rd SW Austell, GA 30106